AYURVEDIC PERSPECTIVE OF PRIMARY DYSMENORRHOEA - REVIEW ARTICLE

Asitha. H¹, N. Vijayakumar²

¹MS (Ay) Specialist Consultant, Dr Divya’s Ayurveda Gynecology and Fertility Speciality OP Clinic, Vanchiyoor, Trivandrum, Kerala, India
²MD (Ay) Former professor and HOD, Dept of Prasutitantra–Streeroga, Govt. Ayurveda college, Trivandrum, Kerala, India

Corresponding Author: asithahari@gmail.com

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ABSTRACT
The medical term for painful period is "dysmenorrhea". Dysmenorrhea among adolescents is of primary in nature that is without any pelvic pathology. Among Vimshati yoniorgas described in Ayurveda classics Udavarta is mentioned as a condition with painful and difficult menstruation, so it can be correlated to primary dysmenorrhea. In this condition the Rajas flow in reverse direction hence the term Udavartini. Women feel immediate relief following discharge of menstrual blood. Normal menstrual flow is the function of Apana vata therefore Apana vata dushti can be considered as the responsible factor for Udavarta. Because of the high prevalence of dysmenorrhea in adolescents and extent of its potential daily interference it should be seriously taken into consideration. Ayurvedic classic textbook along with available modern literatures were referred to make a clear view regarding the concept of Udavarta and its possible correlation with primary dysmenorrhea.

Keywords: Primary dysmenorrhea, Udavarta, dysmenorrhea
INTRODUCTION

Menstruation is a natural phenomenon that occurs throughout the reproductive years of women and is a series of hormonal process a woman’s body go through each month for a possible pregnancy. Some women get through their monthly periods easily with few or no concern and just cause little more than a minor inconvenience. During the menstrual period, most women experience some degree of pain and some sort of distress. As long as the Doshas function in their normal state and are not overshadowed by another Dosa, the menstrual cycle happens optimally. Pain is the most common problem women have with their period. The word dysmenorrhea has a Greek origin, means difficult monthly flow and is now taken to mean painful menstruation. Primary dysmenorrhea is characteristically when adolescents attain ovulatory cycles, usually within 6-12 months of menarche. Dysmenorrhea is the most common cause of pelvic pain it results in activity restriction and thereby cause limitations on academic and sports activities, loneliness, depression, behavioural change like social withdrawal and restriction from daily activities.

Primary dysmenorrhea is mostly confined to adolescents. Tension and anxiety during adolescence period decreases the pain threshold. Spasmodic dysmenorrhea has certain connections with progesterone stimulus to the uterus. The pain is usually cured following pregnancy and vaginal delivery. The pain is related to dystrophic uterine contractions and uterine hypoxia. Behavioural and psychological factors, family history, abnormal anatomical and functional aspect of myometrium, uterine myometrial hyperactivity has been observed in cases with spasmodic dysmenorrhea. Imbalance in the autonomic nervous control of uterine muscle and increased amount of prostaglandin causes hyperactivity of uterine muscles resulting in uterine ischemia and pain. An increase in vasopressin levels without an accompanying increase in oxytocin levels can cause uterine hyperactivity and dystrophic contractions results in ischemia and hypoxia which causes pain. Local myometrial ischemia caused by endothelins and PGF2α aggravate uterine dyserstalsis and hyperactivity. Platelet aggravating factor and leukotrienes contribute to the uterine hypercontractility seen in primary dysmenorrhea. The pain starts a few hours before or just with the onset of menstruation. Severe pain lasts for few hours and may extend to 24 hours, but seldom persist beyond 48 hours. The pain is spasmodic in nature and confined to lower abdomen; may radiate to the back and medial aspect of thighs. Systemic discomforts like nausea, vomiting, fatigue, diarrhoea and headache, tachycardia may occur. Vasomotor changes cause pallor, cold sweats and occasional fainting. In severe cases syncope and collapse may be associated.¹

Udavarta is one among the twenty Yonirogas described in Ayurvedic classics. Painful menstruation and relief of pain after the establishment of proper menstrual flow are the characteristic feature of Udavarta. It can be considered as the most appropriate correlation for primary dysmenorrhea described in modern textbooks.

Udavarta
"Udavarta Ithi Urdhwam Netham n² - Udavarta word refers to upward movement."Vikarena Rajasa Urdhagamanat Udavarta Etyuchate" - Urdhwa Gamaṇa of Rajas is Udavartini

Different Concepts of Udavarta

Acharya Charaka mentioned that due to movement of flatus etc. natural urges in reverse direction, the aggravated Vāyu moving in reverse direction fills the Yoni. Thus, Yoni seized with pain initially throws or pushes the Raja upwards, then discharges with great difficulty.³ "Artave Sa Vimukte Tu Tat Ksham Labhate Sukham" which means after the proper establishment of menstrual flow the pain relieves. The duration of menstrual pain in spasmodic dysmenorrhea is limited to 24-48 hours. Charaka also says that in this condition the Raja moves upwards or in reverse direction hence, it is termed as Udavartini. Both Vaghbatas have followed Charaka mentioned that due to Vegadharana the aggravated Apana Vata moving in reverse direction and the Yoni is seized with pain. Release of Badha Raja Rakta occurs and it can be correlated to discharge of clotted menstrual blood when there is reduced fibrinolytic activity. Susruta in Uttara Stana giving a very short description about the disease, says that besides
painful frothy menstruation there are other pains of Vata (Anila Vedana). Here Anila Vedana can be taken as low back ache, pain radiating to legs, headache, general malaise etc. Samanthat Vritam Varthulum Yatra Vayuna mentioned in Madhava Nidana represents the overall movement of Vayu in the uterus. It can be related to irregular myometrial contractions, is considered as the one of the contributing factors for primary dysmenorrhea. Yogaratnakara points out the association of Kapha in the menstrual discharge in Udavarta is given as Sa Tu Yoni Kaphenaivartavam Cha Vimunchati. If it is considered as associated with mucous membrane or endometrial fragments, it is comparable to membranous type of dysmenorrhea.

Nidana (aetiology)

Vishesha nidana of Udavarta

Vegadharana is the Vishesha nidana responsible for Udavarta.\(^5\) Vegadharana includes Adhvatadi Vegadharana. Expulsion of Adhovata, Sukra, Mala, Mutra, Artava is the function of Apana Vata. According to Vagbhata Samana Vata also carries Dosha, Artava, and Ambu. So, any Nidana which vitiate these results in Udavarta Yoniyapat.

Samprapti (Pathogenesis)

By the above mentioned Nidana Seva aggravation of Vata and derangement of Kapha occurs. The aggravated Vata especially Apana Vata when faces Marga avarodha the normal Gati of Vata is affected and results in Vimargamamana. In addition to this unusual contraction of cervix and body of uterus are associated. Along with the Vimargamana of Vata there occurs Vimargamamana of Rajas. Due to this manifestation of severe pain and difficult discharge of frothy Rajas took place. All these events contributing to difficulty in expulsion of Rajas or painful expulsion of Rajas.

Here there is Srotodushi and Srotas involved is Artavavaha Srotas. Two types of Srotodushti is there Vimargamama, that is the Artava moving in the reverse direction and the Sanga as the menstrual blood is directed in the reverse way, it stays longer in the Yoni and discharged with difficulty.

Samprapti Ghatakas

Dosha - Vata, Kapha as Anubhanda dosha (Vata – Vyana, Apana, Pitta – Ranjaka, Pachaka

- Dooshya - Rasa, Rakta,
- Srotas - Artavavaha Srotas
- Srotodushti prakara - Sanga, Vimargamama
- Roga marga - Abhyantara
- Prabhava sthana - Pakwasaya
- Sthana samsraya - Garbhasaya
- Vyakta sthana - Garbhasaya

Purvarupa

Few hours or a day prior to menstruation slight low back ache or lower abdominal pain manifest as Purvarupa.

Rupa

| Rajakrichrata\(^6\) | Difficult discharge of menstrual blood |
| Artave Sa Vimukte Tu Takshanam Labhate Sukham\(^7\) | Immediate relief following discharge |
| Phenila Artavam\(^8\) | Frothy menstrual blood |
| Anila Vedana\(^9\) | Other pains of Vata like malaise, body ache |
| Kapha Samsrishta Artava\(^10\) | discharge of menstrual blood with Kapha |
| Badham Phenilam Phenayuktam Rajo Rakta\(^11\) | Discharge of clots along with menstrual blood |
| Samanthat Vritam Varthulum Yatra Vayuna Sa Thadha\(^12\) | irregular uterine contractions due to all around movement of Vayu |
| Kaphenaivam Artavam Cha Munjati | difficult discharge of menstrual blood with Kapha. |

Upasaya (Relieving factors)

- Vatanulomana Aharas
- Vatanulomana Viharas
- Bahya Ushna Prayoga on lower abdomen

Anupasaya (Aggravating factors)

- Vata Prakopa Aharas
- Vata Prakopa Viharas
Differential Diagnosis
Among Yonirogas mentioned by different Acharyas, pain associated conditions are seen in the following Yonirogas.

Kastartava is also found in Vatiki, Vataja artavadushti, Sannipatiki, Antarmukhi, Suchimukhi, Vipluta etc.

Upadrava
As specific Upadravas of Udavarta are not mentioned in classics, those mentioned for Yoni vyapath can be considered. Thus Pradara, Gulma, Arshas, Vandhyatwa etc. can be considered as Upadravas.

Sadhyasadhyata
In classics Udavarta is described as a Vatika yoni vyapat, since it is Eka Doshaja, Udavarta can be considered as a Sadhyaroga.

Chikitsa
As Vata Vaigunya is the root cause of Udavarta correction of vitiated Vata and removal of the cause are the treatment principle to be adopted in Udavarta chikitsa.

Specific Treatment
Snehana with Trivrita sneha (mixture of Grita, Taila, Vasa), Swedana, use of Gramya, Anupa, Audaka mamsa rasa, Vasti and Pana of Ksheera prepared with Dasamula, Anuvasana vasti and Uttar vasti with Trivrita sneha. In Astanga samgraha it is mentioned that Vatika yonirogas including Udavarta all Vatahara upakrama should be done. Yoni pichu with Taila made up of Kusha, Tagara, Devadaru, Vartakini and Saindhava. Medicated oil prepared with decoction of Rasna, Malati, Chinnaruha, Madhuka, Bala, Vyaghir, Devadaru, roots of Chitraka, Yuthika each one Karsa, one Prastha of oil, cows urine and two parts of cows milk. Diaper soaked in this oil and put into vagina relieves the pains caused by Anila.

Samanya Chikitsa
General principles of treatment
- Snehana with Sukumara Ghrita
- Swedana
- Virechana - It is the most appropriate Shodhana as Apanavata Vaigunya is the root cause.
- Vasti can be administered using Saptasaram kashaya, Sukumara Ghrita Satapushpakalka combination.
- Uttara vasti- It helps in removing the blockage of channels, Vata Samana and Brahmana to Garbhasaya. Sukumaram Ghritam, Phalasarpis are some of the Yogas used for administration of Uttara vasti
- Vata Samana Pralep, Parisheka, Avagaha, Pichu etc. can be administered according to the condition of Doshas.
- Snigdha, Ushna, Amla, Lavana Dravyas should be used for the relief of menstrual disorders from Vata.
- For Avrita Apana Vayu, treatment should be Agnideepaka, Vatanulomana, and Pakvasa Shudhikara.

Shamana yogas
Saptasaram Kasayam, Sukumaram Kasayam, Dhawantaram Kasayam, Maharasadhi Kasayam, Rasna Swadamstradi Kseerapakam, Pachottikoovaladi Kasayam, Hinguvachadi Churnam, Pushyanugam Churnam, Sukumara Ghritam, Phala Sarpis, Kumarayasam, Asokarisham, Rajapravartini Vati, Dhanwan-taram Gulika

External medicines
Saindhavadi Taila Pichu, Guduchyadi Taila Pichu, Dhaktyadi Taila Pichu, Palasha Nruha Vasti, Shatavaryadi Anuvasana Vasti, Guduchyadi Rasayanika Vasti, Baladi Yamaka Anuvasana Vasti, Shatavaryadi Rasayana Vasti, Mushaka Taila Pichu

Yogasanas
Asanas found to be effective in dysmenorrhoea are Halasana, Sarvangasana, Bhujangasana, Ardhamatsyendrasana and Pranayama like Nadishodana and relaxation technique like Shavasana. It increases the circulation of blood and flow of vital energy to reproductive organs and establishes balance among hormones regulating menstruation.

Pathya-Apathya
General Pathya- Apathyas mentioned for Yoni rogas can be consider for Udavarta yonivyapat also.
**DISCUSSION**

Samanya nidana of Yoniogras like Mithya achara Pradushtarattava, Beeja Dosha and Daiva can also be included as the cause of Udavarta. Mithya aharas like Alpa Ruksha Sashka Ahara, Athyasana, Vyshama Asana, Virudha Ahara, Vatala Aharas and Akala bhoha janca causes vitiation of Vata. There is significant relation between dysmenorrhoea and Vata. Dysmenorrhoea is considerably higher in girls who are consistently eating fast food. Junk foods lack macronutrients and are rich in saturated fatty acids. These acids affect the metabolism of progesterone in menstrual cycle, which might be responsible for triggering dysmenorrhoea. In short, the Ahara consumed must be Hitra for maintaining the Doshas in equilibrium and thereby the Aroga avastha of the reproductive system is assured.

Viharas include different types of lifestyle (dos and don'ts) as suggested in Ayurveda. Mithya vihara include Vegadharana, Ativyavaya, and coitus in improper posture or with Apadavras. Abstinence from following proper Rituamati Charyas and indulging in strenuous activities especially during the menstrual period may predispose dysmenorrhoea. Sedentary lifestyle, and suppression of natural urges especially in students and working women are commonly seen Mithya viharas. Vegadharana causes Vata vitiation and the vitiates Vata causes the vitiation of other two Doshas also. Among these causes the vitiations of lifestyle is Abhishyandi in nature and cause Kapha Dushhti.

Ratrijagarana (night awakening) one Mithya vihara followed by students. It leads to Vata prakopa and Agni Dushti. Wakefulness in night causes disturbance in the activity of digestive enzymes result in indigestion. Day time sleep is Abhishyad and causes Tridosha dushti according to Susruta and Kapha dushti and physiological reduction of Pitta according to Charaka. According to research, daytime sleep disturbs the daily activities of digestive enzymes. So, the derangement of sleeping patterns result in Agni Dushti and Dosha dushti. Shoka, Bhee, Atichinta, Krodha are the Manasika bhavas which causes Vata Kopa.

Stress and strain which are the result of present-day life is one of the risk factors of primary dysmenorrhoea. In classics these are the known causes of vitiation of Vata. Due to hormonal changes adolescents tend to have more intense and wide-ranging emotions than children or adults. Increased pain sensation during the stressful condition is due to decrease in the level of testosterone, increase in cortisol level and activation of sympathetic nervous system. In conclusion, stress increases the activities of the hypothalamic-pituitary-adrenal axis and decreases hypothalamic-pituitary–gonadal axis activity and thereby increase in pain perception. Social withdrawal due to depressed mood could be yet another reason for the increased severity of the condition.

Pradushtarattava: Artava, if taken as ovarian hormones in ovulatory cycle, they influence the release of prostaglandin and vasopressin. These hormones also modulate the sensitivity of uterus to these hormones and other factors which result in dysmenorrhoea. While considering primary dysmenorrhoea it can be taken as the hormonal imbalance especially in the levels of progesterone and prostaglandins. Prostaglandins are secreted under the influence of progesterone. So, variation in progesterone level causes increased prostaglandin synthesis and uterine contractions.

Beeja dosha: Congenital structural anomalies of genital tract and familial tendency of dysmenorrhoea can be taken under the heading Beeja Dosha. Functional abnormalities like cervical stenosis, uterine hypoplasia, uterine myometrial hyperactivity and hyperstimulation of nerve endings supplying uterine muscles can be considered due to Beeja Dushti.

Daiva means unknown or idiopathic causes: The exact cause of the disorder is not completely understood. However, there are many known factors that play a significant role in the pathogenesis of primary dysmenorrhoea. It is caused by myometrial activity resulting in uterine ischemia causing pain and this myometrial activity is modulated by prostaglandin synthesis. It is postulated that certain unknown factors may play a role in alteration in blood circulation and myometrial contraction.

**Role of Vata dosha in Udavarta yoni vyapat**

To understand the pathogenesis of this disorder understanding the role of Vata Dosha is inevitable. Menstrual bleeding is a function of Apana Vata. Apana Vata assists in all excretory activities such as passing of stool,
and urine, ejaculation of semen, natural delivery of fetus. Artava (menstrual blood) gets excreted each month cyclically in women, comes under Apana Vata activity. Classics have mentioned location of Apana Vata as lower back, urinary bladder, genital tract and thighs. Obstruction to the outflow of blood by stenosis of internal os causes retention of menstrual blood and sets up irregular, spasmodic and painful menstruation. As per Ayurveda this obstruction is caused due to Vata. While considering the etiopathogenesis of primary dysmenorrhoea pain is related to dysrhythmic uterine contractions. Dysperistalsis and hyperactivity of the uterine junctional zone is another factor involved. Over activity of sympathetic nerve and hypertonicity of circular fibres of isthmus also contributing primary dysmenorrhoea. These factors also pointing to the involvement of Vata dosha.

**Role of Samprapti ghatakas in manifestation of disease**

Vegadharana can be considered as the Vishesha Nidana for Udavarta. Along with this intake of Vata Kopa Ahara Vihara leads to Vata Kopa especially Apana Vata. The derangement of Kapha occurs as Anubandha Doshas Dushhti. Deranged Apana Vata causes Sangha and Vimargagamana in Artavavaha srotases and Sthana Samsraya in Yoni Garbhhasaya. Due to vitiation of Apana Vata, Aakunjana and Prasarana does not takes place properly. This can be taken as the dysrhythmia of uterine muscles which will hinder the proper flow of menstrual blood leading to Rajakrichrata. Besides this the main clinical feature of Udavarta is pain caused by the Viloma Gati of Vata and Artava. Here Vata vaigunya occurring either by Margavarodha i.e. anatomical or physiological obstruction or Doshavriti Margatwam which results in Sangha and Vimargagamana in the Artavavaha Srotas which in turn leads to painful menstruation or Udavarta.

Few hours prior to menstruation slight low backache and lower abdominal pain manifest as Purvarupa. Viloma Gati of Vata and Rajas results in the manifestation of Rupa of Udavarta Yoni Vyapat such as severe Ruja during menstruation, Rajakrichrata, Phenila Artavam, Kapha Samsrishta Artava, Badha Rajas, Anya Vata Vedana. Associated gastrointestinal and neurological symptoms may be due to deranged or decreased activity of Pitta and Vata Kopa. These Lakshanas starts along with the initiation of menstruation and sustains for 1-3 days depends on the type and degree of Dosha Dushti, with individual variations. A feeling of immediate relief following the proper flow of menstrual blood.

**CONCLUSION**

- **Udavarta** mainly affecting the females of adolescence period and late twenties, especially unmarried and nulliparous females.
- **Udavarta** has a positive familial background.
- Decreased Satwabala and anxious or stressed-out mental status are the factors contributing to worsen the agony caused by Udavarta.
- **Vegadharana** and Mithya Ahara Vihara causes Udavarta.
- Vitiated Apana Vayu is the causative factor for Udavarta, the Viloma Gati of Apana Vata associated with Artava causes pain.
- **Vatanulomana, Shoola Hara, Vata Kaphahara, Sophahara, Srotovishodana** are the properties of the drug doing Samprapti Vighatana and thereby curing Udavarta.

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